

City of Portland, Maine - Building or Use Permit Application

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 08-1011	Issue Date:	CBL: 039 B011001
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Location of Construction: 44 OAK ST	Owner Name: FRYE ASSOCIATES	Owner Address: 44 OAK ST	Phone:
Business Name: Head Games Hair Salon	Contractor Name: Frye Associates	Contractor Address: 44 Oak St Portland	Phone 2077753184
Lessee/Buyer's Name	Phone:	Permit Type: Change of Use - Commercial	Zone: B-3

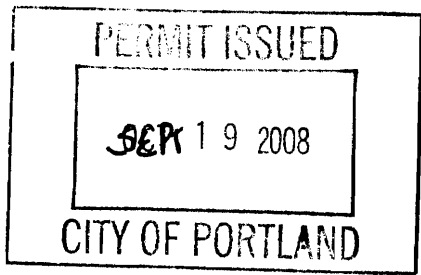
Past Use: Commercial - Office	Proposed Use: Commercial - Hair Salon / Spa - Change of use from commercial office to Hair Salon / Spa "Head Games Hair Salon" W/ tenant fit-up to 1st floor & basement	Permit Fee: \$895.00	Cost of Work: \$80,000.00	CEO District: 1
		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied <i>See conditions</i>	INSPECTION: Use Group: B Type: 3 IBX-2003	

Proposed Project Description:
Change of use from commercial office to Hair Salon / Spa "Head Games Hair Salon" W/ tenant fit-up to 1st floor & basement

Signature: *Corra Curran* Signature: *JMS 9/18/08*
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) *within on Free St*
 Action: Approved Approved w/Conditions Denied
 Signature: *[Signature]* Date: *9/25/09*

Permit Taken By: *Idobson* Date Applied For: *08/15/2008* **Zoning Approval**

1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 2. Building permits do not include plumbing, septic or electrical work. 3. Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work..	Special Zone or Reviews <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Denied Date: <i>9/25/09</i>	Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied Date:	Historic Preservation <input checked="" type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date:
	Date: <i>9/25/09</i>		



CERTIFICATION

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in the application is issued, I certify that the code official's authorized representative shall have the authority to enter all areas covered by such permit at any reasonable hour to enforce the provision of the code(s) applicable to such permit.

SIGNATURE OF APPLICANT	ADDRESS	DATE	PHONE
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE